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995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Under the Par PARENT ARBUNCATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 4TL 00013 OTHER THAN APPLICATION AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 1) (Cotumn 2) NUMBER EXTRA NUMBER FILED RATE (S) RATE (\$) FEE (\$) FOR FFF (\$) BASIC FEE (37 CFR 1.18(a), (b), or (c)) NA N/A N/A N/A SEARCH FEE NA NA NA N/A (37 CFR 1.16(N), (i), or (m)) **EXAMINATION FEE** N/A NA N/A NA (37 CFR 1.16(o), (p), or (q)) TOTAL CLAIMS x minus 20 = OΒ (37 CFR 1.166)) INDEPENDENT CLAIMS = minus 3 = × (37 CFR 1.16(h)) If the specification and drawings exceed 100 sheets of paper, the application size fee due APPLICATION SIZE is \$250 (\$125 for small entity) for each FEE (37 CFR 1.16(s)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(I)) NA N/A " If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 3) SMALL ENTITY oS (Column 1) SMALL ENTITY CLAIMS REMAINING HIGHEST PRESENT RATE (\$) NUMBER RATE (3) ADDI-ADDL **EXTRA PREVIOUSLY** TIONAL TIONAL **AFTER** ENT AMENDMENT FEE (\$) PAID FOR FEE (\$) Minus Total 0 20 0 20 (37 CFR 1.166)) x = OR END Minus 5 5 0 0 x . OR = Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) N/A OR N/A TOTAL TOTAL 0 OR ADD'L FEE ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE (5) ADDI-RATE (\$) ADDI- $\mathbf{\omega}$ **EXTRA** AFTER PREVIOUSLY TIONAL TIONAL ENT MENDMENT PAID FOR FEE (\$) FEE (\$) Total Minus 8 (37 CFR 1.166)) = ENDM OR Minus X . OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(i)) N/A OR N/A TOTAL TOTAL OR ADD'L FEE ADD'L FEE If the entry in column 1 is less than the entry In column 2, write "0" in column 3.
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

disction of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.